

SEND Futures Plan Update

1. Introduction

- a. The Council's (new) People Committee will consider a draft updated Plan in June 2021. This update will include the Dedicated Schools Grant Financial Model as per the Safety Valve Funding Agreement and the new Key Performance Indicators (KPIs). These new KPIs will form the SEND Partnership Board Performance Dashboard from Q1 2021/22.
- b. The Local Government Association (LGA) Peer Review of SEND provision in Kingston took place in the last week of April. The full report is expected in June and a separate item on the interim findings of the review is included on this meeting's agenda.
- c. On 13th May the DfE's annual data publication on children and young people with an education, health and care plan in England was released. It is the first publication of this dataset covering the coronavirus. It is unclear what impact the various related events in 2020 have had on this data, not only in terms of how they have impacted for example needs or rates of requests for assessments, but also in terms of how the data was collected and reported. Headlines from the dataset include that the total number of EHC plans in England increased by 10.4% during 2020 (a similar increase to 2019), and the number of new EHC plans issued in England in 2020 increased by 11% compared to 2019. For comparison, the comparators for London are 9.6% / 10.7% and Kingston 8.4%/12.9%.

2. Workstream 1: Co-production, engagement and participation

a. Children and Young People

- i. Virtual group drop-ins and 1:1s held for members
- ii. 8 SEND Recruits Crews: Assistant Psychologist, Sessional Support Workers, PFA EHCP Coordinators, Occupational Therapists
- iii. 1 'Mixed' Recruits Crew for AfC Board of Directors (Non-executive Independent Directors): young people representatives from SEND Participation alongside young people from Children in Care Council, Kingston and Richmond Youth Council and Windsor and Maidenhead Girls Policy Group. First ever Recruits Crew for AfC Board
- iv. Easy Info Group: advised on leaflets about blood tests, OT feedback resource and 'about our team' guide. Easy Info. Group would like the British Institute of Human Rights' Easy Read Guide to the Right to Accessible Information shared widely:
<https://www.bih.org.uk/Handlers/Download.ashx?IDMF=e51028db-8962-49f8-905c-31ff258c68e9>
- v. Young People's Health Group: young people want health professionals to give them information and, very importantly, give them notice when things (especially people) are going to change or leave. They want this before it happens, not after!
- vi. Social Care Whole Service Event: SEND young people's voices and messages opened and closed the half-day event, a young person's film was played during it and young people co-delivered two workshops on participation
- vii. School Focus Groups re-started: very positive response from schools re. Involvement in Short Breaks Consultation. Focus groups arranged in four special schools, one mainstream secondary

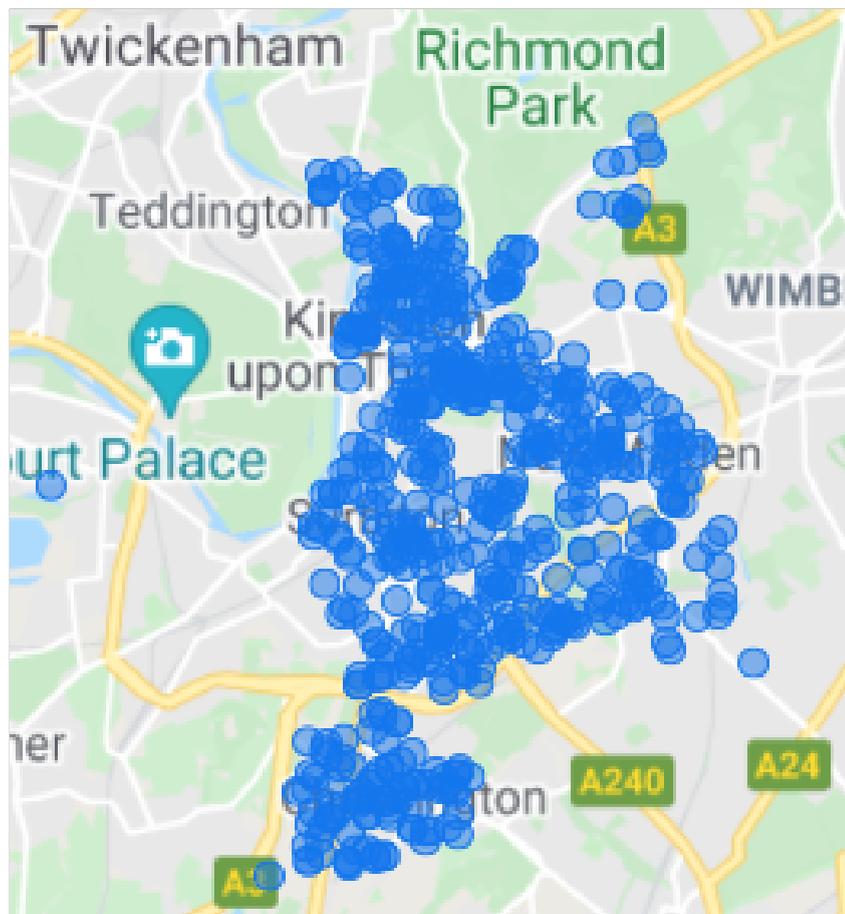
and two mainstream primaries. Plans for re-starting regular 'general' focus groups are also underway (results from those feed into SEND strategic data)

- viii. Kjay's message about terminology relating to ASC has been taken up and discussed in a number of different meetings and forums, including at the DfE.

b. Parents and Carers

- i. SEND Register. At the time of writing the SEND Register has 685 registrations from Kingston families, with 663 of these requesting a Disability Awareness Card and 52% relating to an EHC plan. There appears to be a good geographical spread of registrations across the borough (see map below), although this will need to be confirmed by comparing with the total underlying cohort. This, together with decisions about how this register is now used, remains work in progress.

Kingston registrations for the SEND Register:



- ii. Funding has been agreed for a new post within AfC, shared across Kingston and Richmond, to lead on the work to fully involve parents and carers of children and young people with SEND in the SEND Futures Plan. Appointment to this post will take place asap.

3. Workstream 2: Joint Commissioning

a. Recent achievements and progress

- i. Progress with the implementation of the recommendations of the therapies review, overseen by the Therapies Oversight Group (TOG) continues. More detail is provided under WS3 below. Sue Lear (Deputy Director of Transformation NHS South West London CCG, Richmond and Kingston) will chair the TOG from June.

- ii. The new Joint Children’s Commissioner (a post shared across South West London CCG and & AfC) has started (Karel Stevens-Lee) and amongst other things is leading on the joint spot purchasing framework for therapies.
 - iii. The Section 75¹ Partnership Group is being established and representatives from children’s services from both SWLCCG and AFC will be part of the membership
 - iv. Consultation on short breaks launched on March 23rd and running to 17th May
- b. Concerns (same as previous period)**
- i. Recruitment remains an issue, with some posts filled with agency staff
 - ii. COVID-19 impact has meant a reduction in service offer and delays with progressing the integrated service model
 - iii. Complexity of the spot purchasing history and moving to a integrated spot purchasing agreement
- c. Priorities for the next three months**
- i. Ensure smooth transition of responsibilities from AfC’s Director of Commissioning and Partnerships who is departing in June.
 - ii. Agree therapy service specifications and KPI’s
 - iii. Development of an outcome focused dashboard
 - iv. Begin the Year 2 priorities such as recruitment
 - v. Agree the spot purchasing arrangements

4. Workstream 3: Local provision

a. Therapies

- i. Draft spot-purchasing framework agreement is now in place, subject to final sign off from the TOG
- ii. New specifications for each of the therapy services have been drafted. These are now being discussed by the providers and we will work to finalise in the coming months. Providers are already working to the specifications in principle
- iii. Year two priorities and funding has been agreed
- iv. In May 2021 the TOG will focus on finalising the Key Performance Indicators which will enable data collection for the remainder of 2021-22 to establish a clear baseline

b. Emotional wellbeing and mental health

- i. Completing review of existing provision to describe ‘as is’ situation and use to inform vision and begin business case
- ii. Meeting SWLStG and CCG to consider possible move to Thrive model
- iii. Links established with Merton regarding next steps and lessons learnt to shape our plans

c. Local Places

- i. New Dysart primary provision in North Kingston planned for September to meet increased demand
- ii. Alexandra Primary, Key Stage 2 Specialist Resource Provision building work agreed for September
- iii. ASC Free School, Moor Lane site plans are developing, regular meetings being held with Ambitious About Autism (AAA) to plan for the first cohort. Meeting to be held with AAA and Orchard Hill College and Academy Trust (OHCAT) to scope out clear designation / type of need in each school

¹ **Section 75 agreements** are made between local authorities and NHS bodies and can include arrangements for pooling resources and delegating certain NHS and local authority health-related functions to the other partner/s

- iv. Kingston 16-25 campus plan is developing across AfC and Adults' and meeting with OHCAT staff.
- v. Consultation meetings with young people and families planned in June. Bid for capital funding submitted to DfE. Business case developing, for agreement at RBK SLT

d. 16 to 25 Years

- i. Two new externally funded re-engagement projects started up through 'way to work' team: one aimed at those with mental health issues and the other at young people with chronic, ongoing health needs/disabilities
- ii. Next steps interviews completed for Y11 young people with EHC plans and Year 10 EHC plans and who are SEN Support (both remotely and since March, face to face)
- iii. Post 16 transition checklist to accompany data requests to schools for notification of any Year 11 SEN Support/EHCP learners who are at risk of NEET. Schools to 'RAG-rate' learners in terms of risk and AfC to share with Colleges so appropriate support can be put in place
- iv. Statutory September Guarantee data from schools to identify learners without an offer for September - 14-25 team to follow up over summer 2021
- v. Develop links with council's Maximising Independence Board

e. Concerns

- i. Potential delay in Dysart satellite - children without school place in September
- ii. Challenge of finding a suitable site for the proposed 16-25 campus
- iii. Increase referrals to Emotional Health Service for emotional wellbeing and mental health needs. This is also leading to increased waiting times.
- iv. Increased referrals for medical tuition from young people who are too anxious to attend school
- v. More learners at risk of NEET (not in employment, education and training) to follow up over the summer within limited resource
- vi. Difficulty recruiting occupational and speech and language therapists. Potential impact on capacity and ability to fulfil therapy provision
- vii. Continuity of leadership in commissioning post departure of Director of Commissioning and Partnerships Post.

f. Priorities for next 3 months

- i. Adaptations for Dysart satellite underway
- ii. Complete Thrive Model investigation
- iii. Recruit additional speech and language and occupational therapists
- iv. Agree transition arrangements for new AfC leadership
- v. Agree KPIs for inclusion in the service specification- ensure key stakeholder views are sought, including parents and carers- July 2021.
- vi. Finalise the service specifications and the spot-purchasing framework agreement ahead of September 2021.
- vii. Finalise Mental Health review of current provision
- viii. Identify learners at risk of NEET and provide support through information, advice and signposting
- ix. Provide Next Steps interviews to Year 10 learners referred by schools

5. Workstream 4: Early intervention and transitions

a. Recent impact and progress

- i. The workstream has met to agree next steps following findings of the LGA SEND Review in Kingston. These findings included a number of recommendations relating to the remit of this workstream.

- ii. First 1001 Days. A summary of services delivered across Children's Centres has been created. A programme (Video Interactive Guidance) has been identified as part of the 1001 days offer and four practitioners from across the centres and two family coaches are being trained (covering Richmond and Kingston). The programme is in its pilot stage with a focus on babies open to Social Care but the plan is to then have practitioners trained to train others and make the programme available across Early Help. The Head of Service will be re-introducing the Children's Centre partnership that can support the development of the First 1001 days offer. The Government has also launched a 'Best Start for Life' vision that is based on the White Paper on the First 1001 days. This has a number of recommendations that will influence our delivery of services in these critical first days of a baby's life.
- iii. Early Help Resilience Networks. Networks have been held for the three age groups (0-4, 5-10, 11+). A range of needs have been presented and all have been sign posted to local services / organisations. Excellent feedback has been received from those observing and presenting - in regard to the range of options available and the chairing of the network. The Early Help Strategic Board, which is attended by senior representatives from across the partnership, oversees the KPIs and impact of the resilience networks.
- iv. Nurture programmes. The last workstream meeting discussed impact measures and members were provided with reassurance of the direction of the initiative which is coming to the end of its first year.
- v. Following on from the establishment of a working group on a Quality First Teaching Charter with four sub groups covering Quality First Teaching, Training, Menu of Assessments and interventions, leads have now been appointed to each of the sub groups to take things forward. A core group meeting is to be held later in May where the road map will be shared. The aim is to have a draft version of the resource available for consultation in the autumn term.
- vi. Transition. A considerations checklist has been created for schools and colleges to use to support both Key Stage 2 to 3 and Key Stage 4 to 5 transition, as has a protocol for guiding schools and colleges with KS4-5 transition. Thanks to school colleagues for their assistance with this, the final version of which is close to being shared.

b. Areas where progress has been slower than hoped / concerns

- i. As with the previous period, the intermittent nature of school has impacted on the success of Emotionally Related School Avoidance (ERSA) work but plans are in place to regain the momentum we had in the autumn term through presenting on it at the SENCO forum.
- ii. Increasing numbers of pupils potentially not accessing school for 15 days [cumulatively or consecutively]. A guidance document has been completed to share with schools and external professionals to ensure we are adopting a consistent approach.
- iii. Health partners are working closely with AfC to look at how additional funding could support better collaboration between health and education to prevent the escalation of need whilst also better supporting those in crisis.
- iv. The increase in referrals to Early Help following the re-opening of schools has also included a rise in mental health concerns, for both children and families. The relationships developed through the Resilience Networks will be utilised to access appropriate services, particularly when families are waiting for mental health services.

c. Priorities for next three months

- i. Concluding the Quality First Teaching Charter document.
- ii. Confirming the school funding element of improved the therapy offer.
- iii. Finalising the transition protocol in place for years 6 to 7 and post 16 to help guide schools with

the transition process. Linked to this we are seeking to streamline AfC communications around transition to reduce paperwork for schools. A meeting is to take place later in May to address this for 2022-23 process.

- iv. Embedding of ERSA processes within schools.
- v. Reviewing early impact of resilience networks.
- vi. Developing 'launchable' product for First 1001 days.
- vii. Developing our support of those Young People suffering with anxiety and unable to leave the home.

Workstream 5: Assessment and planning

a. Recent impact and progress

- i. High Level Outcomes Based Commissioning. Multi-agency workshop took place on March 16th to further develop this work and identify ways in which the overarching high level outcomes are embedded within new service specifications for speech and language therapy, occupational therapy and physiotherapy.
- ii. Bimonthly quality assurance meetings. These meetings continue (last date 16.04.21) with multi agency representation. The last meeting reflected significant improvements in all plans reviewed including evidence of the child and young person's voice , clear description of need and specification and quantification of provision. Analysis of outcomes reflected some variation in system thinking and this is being addressed through all partners participating in the CDC online training on "Developing holistic outcomes in EHCPs". Following the online training a programme of CPD activities has been established over the next academic year with some general workshops and some which target specific areas of need (this reflects feedback from settings /advice givers). Preliminary work has begun with the Parent Carer Forum regarding holistic outcomes.
- iii. Provider quality assurance. Further deep dive of advice from SALT has taken place . DCO and SaLT service leads reviewed 6 examples of advice. Learning reflects clear, jargon-free description of need, improving specification and quantification of provision , and need to remove recommendations for support which should be available through Quality First Teaching and Ordinarily available provision. Deep dives have also been undertaken by the Educational Psychology Service, where there is evidence of greater specificity and quality of advice - focusing on specific and identified provision for individual children.
- iv. Advice templates as part of EHCNA. As we move towards digitisation of the process around EHCNA we have now agreed to pilot a new advice template for health providers to support the delivery of clear advice around the golden thread , strengths, needs, outcomes and provision for inclusion in plans.
- v. Timeliness of advice. The following data reflects Synergy reports and further triangulation is required with provider data systems.

Service	Oct 20	Nov 20	Dec20	Jan 21	Feb 21	Mar21	Apr 21
Paediatrics	72% n=25	75% n=4	100% n=10	100% n=11	75% n=8	88% n= 8	76 % n= 17
Occupational Therapy	57% n=1 4	100% n= 1	100% n= 6	100% n=2	67% n=9	100% n=1	80% n=5
Speech and Language	67%	50%	88%	33%	82%	33%	38%

Therapy	n=12	n=	n=8	n=3	n=11	n=6	n=8
Physiotherapy	73% n= 11	100% n=2	100% n=8	100% n=1	100% n=6	100% n=1	100% n=7

Challenges around timeliness of advice are being addressed with Providers.

- vi. Annual Reviews.** We are developing a quality assurance mechanism for annual reviews and we have clarified health provider participation in annual reviews as follows, reflective of the Code of Practice requirement for health providers to “collaborate”:
1. school inform provider of annual review date
 2. provider will provide summary report on progress against targets,
 3. provider will attend and provide report where there is a change in need +/- or provision).
- vii.** Further work is needed to work with school partners to ensure they are engaging with providers to ensure effective graduated approach is applied to annual review activity; where relevant seeking advice from Educational Psychologist. Additional resources have been provided to the SEND team to support the administration of the Annual Review process.
- viii. Tribunals outcomes.** Multi-agency tribunal panel has now been established in order to ensure all services are aware of appeals and manage requests for advice and representation. This will provide an opportunity to reflect on outcomes and ensure learning in the system.
- ix. Complaints:** A joint complaints process is being developed between the CCG and AFC, to include reflective practice and lessons learned following complaints.
- b. Areas where progress has been slower than hoped**
- i. “A review of the current cohort of children should be used to determine whether interventions can be reduced and whether opportunities exist for bringing children back into in-house, in-borough, provision” . This review has yet to be started.
 - ii. “Review of the Golden Binder”
 - iii. Integrating developments in Personal Budgets for AfC and CCG.
 - iv. Timeliness of Annual Reviews; co dependent on system development and recruitment
 - v. Pathways to adulthood and linking up the whole system
- c. Priorities for next three months**
- i. Developing and delivering training on Holistic Outcomes across the system .
 - ii. Ensuring links between service specific QA processes for EHCNA and wider bimonthly QA and ensuring the learning from this activity improves quality.
 - iii. Process changes related to EHCNA , linked to the move towards digitisation and including introduction of reviewed advice templates.
 - iv. Annual review process and participation.
 - v. Designated Clinical Officer introducing “health drop in “ sessions for EHCP coordinators developing plans for CYP with complex health / medical conditions .
 - vi. Implementation of tribunals panel and process.
 - vii. Recruitment
 - viii. Development of Quality Assurance tool; Annual Reviews
 - ix. Training for schools; use of ‘ Education planning meetings’
 - x. Ensure Local Offer website is updated re pathways - Preparing for Adulthood and work with the PCF and schools to share practice
 - xi. Implement SEND team transformation and recruitment

d. Number of education, health and care plans

- i. The total number of Education Health and Care plans maintained by Kingston on 17 May stood at 1440. This was an increase of 86 over the previous twelve months, or 6.4%. The latest national data for the increase in Education Health and Care plans is for calendar year 2020 when the number of plans increased by 10.4% in England and 9.6% across London boroughs.

8. Finance update

The High Needs Block overspend in 2020/21 was £6.6 million, with the Dedicated Schools Grant (DSG) overall overspending by £5.2 million. When added to the cumulative overspend and DfE advance from previous years (£16.3m + £3m) and netted with the Safety Valve Agreement (equivalent of £12m benefit in 2020/21), the cumulative overspend in the DSG was £12.4 million at the start of financial year 2021/22. A more detailed breakdown of spend in 2021/22 will be provided at the next Partnership Board in July.

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